Case 1:23-cv-00313-LMM Document 1-1 Filed 01/20/23 Page 1Forton County Superior Court ***EFILED***JH COUNTY: Date: 12/15/2022 10:36 AM Cathelene Robinson, Clerk
Plaintiff Plaintiff OcorajoStatetivanceInvestment Commission Defendant Defendant
COMPLAINT FOR Unlawful discrimination
Now comes <u>language</u> , plaintiff in the above-styled action, and states his complaint as follows:
The defendant is SFTC, who is a resident of Washington 27 Street; City of Arta, County, Georgia, and is subject to the jurisdiction of this court.
2. List short and plain statement in separately numbered paragraphs of claim sued upon. Inland accrimination as So Retaliation are the claims. There in my suff I intially want to HK about Laciel. discrimination from another employee. During investigation HK warned me Not to talkabout the Investigation. Days, after the endot the investigation a director Keyint not came to me ask ins. Why did not Nichea First From Point on I set my clambour was known agreease. amons the agency I was invest retaliation from Fallow coporace who telt wrong for going to HK
3. List statement of damages, with items of special damages stated specifically. There experiences tinential and emotional disvess atom having myincomotokan away overwhelmed with

Case, 1:23-cv-00\$13-LMM Document 1-1 Filed 01/20/23, Page 2 pf 13 ANXICTUANA CAPPOSTON AND SUICINA IDECTIONS and had to go to the rapy to keep trom hurtine myself. Doesling with racist innuances from coworkers, supervisors, knowning APPROVINGE CBLOCKERS termination of the dept due to race as opposed to my white counterparts, who recalived lasser. Punishments than termination or similar Acts.	
WHEREFORE, plaintiff demands judgment against defendant for the sum of \$\tag{\text{BD}}\$, together with interest and the costs of this action.	***************************************
Plaintiff Dext of Thempon Address 2760 Dear Dear GA 3030	1
(434840715Ce	

Case 1:23-cv-00313-LMM Document 1-1 Filed 01/20/23 Page 3 of 13

Petitioner Civil Action File No. 2022CV373905 Respondent Civil Action File No. 2022CV373905 Respondent
VERIFICATION
I, (your name) In the light of light of the
Sworn to and subscribed before me, this 14th day of Dec., 20 22: NOTARY PUBLIC My Commission Expires: 121 2023 Notary Seal) PUBLIC COMMISSION EXPIRES OCUMPANION COUNTINE COUNTI





GBA + GSFIC + SPC

Human Resources Form

POLICY FORM # HR-03	Unlawful Discrimination Complaint Form	PAGE 1 OF 2
Employee Name:	You Thompson Employee ID #:	
Job Title: Systems	Administrator Department:	
Work Telephone:	Home Phone: 404840 7/50	
Best time to reach you b	py phone: Morning 5 E-mail: Thompsond 20 ess: 2766 Dearwood Dr. 5W	3110hotmaile
Preferred Mailing Addre	ss:2766 Dearwood Dr. 5W	
I believe I have been un	lawfully discriminated against because of my (check as many as apply	/):
Race	Disability Color Age Sex Religion	
National Orig	gin Political Opinions or Affiliations	
And/Or because of:		
Retaliation	for having filed or participated in a previous complaint of unlawful disci	rimination
Sexual hara	assment in the workplace	
•	e(s) and job titles of the person or persons you allege are responsible retaliation, or sexual harassment.	for the
Lisa sharpton,	Jesse Movers, Alisa Pereira, Kerin Emerat, Na	n Perry
the time and place of the experiencing because of that support your allegated approached management of the experience of	tual basis for your complaint. Please provide as much detail as possible discrimination, the names of any witnesses, and describe the problem of the discrimination. Please continue on a separate sheet and attach a stion. Cous discrimination Claim I was told not specified used to be kept secret. Once Kevin Findsheet and I get michael Maghalaet of losing my job	ms you are

Case 1:23-cv-00313-LMM Document 1-1 Filed 01/20/23 Page 5 of 13

Unlawful Discrimination Complaint Form – HR-03

I know once kerén Emert approached me. I know that the world
what happend was known among theemplayers. Then I received a complaint
because they tovored Michael Maghalass over metron Charyton Frair
She had complain bout Michael not being there. I felt she know what
had happend and sought to reteilente against me for soing to Habert
him. In which she accused me of making a claim against her
to betille her. In the investigations was bias in which they used Youtube
and a black movie to imply meanings that were not approiperate to
the accurating against me. My accurser never stated or implied that I
of and an neither were any disciplinary stated. Opportunity to reconside
Are you submitting additional documents? yes no. If yes, how many pages are attached?
Requested relief:
nequested relief.

My signature certifies that the information contained in this Unlawful Discrimination Complaint Form and supporting documents is true and correct to the best of my knowledge.
Signature: Date: 14/12

Hand deliver, fax, or mail this Unlawful Discrimination Complaint form and supporting documents to:

Director of Human Resources GBA, SPC, GSFIC 2nd Floor 270 Washington Street Atlanta, Georgia 30334 Fax 404-463-5669

For information or assistance please call the Human Resources Department at 404-463-5656.

Case 1:23-cv-00313-LMM Document 1-1 Filed 01/20/23 Page 6 of 13



GBA + GSFIC + SPC

Human Resources Form

Роцсу # HR-02	Unclassified Employee Grievance Form	PAGE 1 OF 2
Employee Name:	Data Thompson Employee ID #:	
	ms Administrator Department:	
Work Telephone:	Home Phone: 4048467/5G	
Best time to reach ye	ou by phone: Morning E-mail: Themyson	2010 hot meil com
Preferred Mailing Ac	Idress: 2766 Dearwood Dr. 5W	
Supervisor's Name:	Steve Mitchell Supervisor's Phone	e #:
involved, and the na Ifical a discret Lisca sharpton Kovia Emart Why did you that mame int That tact the every one in the Are you alleging erro personnel policies, o	r grievance including the date the issue occurred, the names of other of any witnesses. Michael Mandase, a copyor HRD rector Specifically to a menor to speak Director Racking and Accessionne to me got Michael Fired Lass astenished that help on Lues chiral for my livily hand being the came to me and about the 3 it nation who retailistion for Michael and retailistion for Michael oneous, arbitrary or capricious interpretation or application of huma r other procedures? If so, please specify which policies and desc s interpretation or application.	ter July of 202 sol themater eand asked, new from taken cray. took it as In Frezier in resource policies,
		1 × 4 × 2

Case 1:23-cv-00313-LMM Document 1-1 Filed 01/20/23 Page 7 of 13

Unclassified Employee Grievance Form – HR-02

·
,

Are you submitting additional documents? yes no. If yes, how many pages are attached?
Requested relief:
My signature certifies that the information contained in this Unclassified Service Grievance Form and supporting documents is true and correct to the best of my knowledge. Signature: Date: 12/14/2.7
Signature: 17/1/2
Jane deliver for annel this Uncleasified Comics Originals Power and summation designates.

Hand deliver, fax, or mail this Unclassified Service Grievance Form and supporting documents to:

Director of Human Resources GBA, SPC, GSFIC 2nd Floor 270 Washington Street Atlanta, Georgia 30334 Fax 404-463-5669

For information or assistance please call the Human Resources Department at 404-463-5656.

Enclosure with EEOC Form 161-B (01/2022)

INFORMATION RELATED TO FILING SUIT UNDER THE LAWS ENFORCED BY THE EEOC

(This information relates to filing suit in Federal or State court <u>under Federal law.</u>

If you also plan to sue claiming violations of State law, please be aware that time limits and other provisions of State law may be shorter or more limited than those described below.)

PRIVATE SUIT RIGHTS -- Title VII of the Civil Rights Act, the Americans with Disabilities Act (ADA), the Genetic Information Nondiscrimination Act (GINA), or the Age Discrimination in Employment Act (ADEA):

In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge within 90 days of the date you receive this Notice. Therefore, you should keep a record of this date. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed within 90 days of the date this Notice was mailed to you (as indicated where the Notice is signed) or the date of the postmark, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred more than 2 years (3 years) before you file suit may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit before 7/1/10 – not 12/1/10 — in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice and within the 2- or 3-year EPA back pay recovery period.

ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do <u>not</u> relieve you of the requirement to bring suit within 90 days.

ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, please make your review request within 6 months of this Notice. (Before filing suit, any request should be made within the next 90 days.)

IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.

EEOC Form 161-B (01/2022)

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

NOTICE OF RIGHT TO SUE (ISSUED ON REQUEST)

To: Mr. Dexter Thompson 2766 Dearwood Dr. SW ATLANTA, GA 30315 From: Atlanta District Office

100 Alabama Street, SW, Suite 4R30

Atlanta, GA 30303

EEOC Charge No.

EEOC Representative

Telephone No.

410-2022-07908

Lucy Campa,

470-531-4778

Investigator

(See also the additional information enclosed with this form.)

NOTICE TO THE PERSON AGGRIEVED:

Title VII of the Civil Rights Act of 1964, the Americans with Disabilities Act (ADA), or the Genetic Information Nondiscrimination Act (GINA): This is your Notice of Right to Sue, issued under Title VII, the ADA or GINA based on the above-numbered charge. It has been issued at your request. Your lawsuit under Title VII, the ADA or GINA must be filed in a federal or state court <u>WITHIN 90 DAYS</u> of your receipt of this notice; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Less than 180 days have elapsed since the filing date. I certify that the Commission's processing of this charge will not be completed within 180 days from the filing date.

The EEOC is terminating its processing of this charge.

Equal Pay Act (EPA): You already have the right to sue under the EPA (filing an EEOC charge is not required.) EPA suits must be brought in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.

If you file suit, based on this charge, please send a copy of your court complaint to this office.

On behalf of the Commission

Digitally Signed By: Darrell Graham

09/16/2022

Enclosures(s)

Darrell Graham District Director

cc: Lisa Sharpton

Georgia Building Authority 270 Washington Street S.W. Suite 2101

Atlanta, GA 30334

EEOC Form 5 (11/09)		
Charge of Discrimination	Charge Presented To:	Agency(ies) Charge No(s):
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act	EEOC	410-2022-07908
Statement and other information before completing this form.		
	. <u> </u>	and EEOC
State or local Ager	ncy, if any	
	77 70	T w cp: 4
Name (indicate Mr., Ms., Mrs.) Mr. Dexter Thompson	Home Phone (404) 840-715	Year of Birth 1986
Street Address		
2766 Dearwood Dr. SW		
ATLANTA, GA 30315		
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Co	ommittee, or State or Local Govern	ment Agency That I Believe Discriminated
Against Me or Others. (If more than two, list under PARTICULARS below.)	or state or zoom covern	mont regardly rate r Beneve Bassamanand
Name	. No. Employees, Mem	bers Phone No.
Georgia Finance Investment Commission	15 - 100 Employ	yees
Street Address		
270 Washington Street SW Suite 2101		
ATLANTA, GA 30334		
Name	No. Employees, Memi	bers Phone No.
Street Address City, State a	and ZIP Code	·
DISCRIMINATION BASED ON	DATE(S) DISCRIMINATION	ON TOOK PLACE
	21112(b) 21001cm/m, 111(
	Earliest	Latest
Race	12/15/2021	01/25/2022
	1	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):	<u> </u>	
I was hired by the above employer on January 15, 2020, as a Systems Admin		
H.R. On or about December 15, 2021, a female coworker filed complaint with My separation letter does not specify the rules I violated to justify my discharge.		
(African American) and in retaliation, for opposing unlawful employment p		
amended.		
	NOTABLE TO	
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in	NOTARY – When necessary for State	and Local Agency Requirements
the processing of my charge in accordance with their procedures.	y	
I declare under penalty of perjury that the above is true and correct.	I swear or affirm that I have read the above charge and that it is true to the clare under penalty of perjury that the above is true and correct. I swear or affirm that I have read the above charge and that it is true to the clare under penalty of perjury that the above is true and correct. I swear or affirm that I have read the above charge and that it is true to the clare under penalty of perjury that the above is true and correct.	
Digitally Signed By: Mr. Dexter Thompson	SIGNATURE OF COMPLAINANT	
09/16/2022	etineonipro Ave auto	TO DEPODE A TO THE STATE
U.71 I UI 4U44	SUBSCRIBED AND SWORN (month, day, year)	TO BEFORE ME THIS DATE
Charging Party Signature		

CP Enclosure with EEOC Form 5 (11/09)

PRIVACY ACT STATEMENT: Under the Privacy Act of 1974, Pub. Law 93-579, authority to request personal data and its uses are:

- 1. FORM NUMBER/TITLE/DATE. EEOC Form 5, Charge of Discrimination (11/09).
- 2. AUTHORITY. 42 U.S.C. 2000e-5(b), 29 U.S.C. 211, 29 U.S.C. 626, 42 U.S.C. 12117, 42 U.S.C. 2000ff-6.
- 3. PRINCIPAL PURPOSES. The purposes of a charge, taken on this form or otherwise reduced to writing (whether later recorded on this form or not) are, as applicable under the EEOC anti-discrimination statutes (EEOC statutes), to preserve private suit rights under the EEOC statutes, to invoke the EEOC's jurisdiction and, where dual-filing or referral arrangements exist, to begin state or local proceedings.
- 4. ROUTINE USES. This form is used to provide facts that may establish the existence of matters covered by the EEOC statutes (and as applicable, other federal, state or local laws). Information given will be used by staff to guide its mediation and investigation efforts and, as applicable, to determine, conciliate and litigate claims of unlawful discrimination. This form may be presented to or disclosed to other federal, state or local agencies as appropriate or necessary in carrying out EEOC's functions. A copy of this charge will ordinarily be sent to the respondent organization against which the charge is made.
- 5. WHETHER DISCLOSURE IS MANDATORY; EFFECT OF NOT GIVING INFORMATION. Charges must be reduced to writing and should identify the charging and responding parties and the actions or policies complained of. Without a written charge, EEOC will ordinarily not act on the complaint. Charges under Title VII, the ADA or GINA must be sworn to or affirmed (either by using this form or by presenting a notarized statement or unsworn declaration under penalty of perjury); charges under the ADEA should ordinarily be signed. Charges may be clarified or amplified later by amendment. It is not mandatory that this form be used to make a charge.

NOTICE OF RIGHT TO REQUEST SUBSTANTIAL WEIGHT REVIEW

Charges filed at a state or local Fair Employment Practices Agency (FEPA) that dual-files charges with EEOC will ordinarily be handled first by the FEPA. Some charges filed at EEOC may also be first handled by a FEPA under worksharing agreements. You will be told which agency will handle your charge. When the FEPA is the first to handle the charge, it will notify you of its final resolution of the matter. Then, if you wish EEOC to give Substantial Weight Review to the FEPA's final findings, you must ask us in writing to do so within 15 days of your receipt of its findings. Otherwise, we will ordinarily adopt the FEPA's finding and close our file on the charge.

NOTICE OF NON-RETALIATION REQUIREMENTS

Please notify EEOC or the state or local agency where you filed your charge if retaliation is taken against you or others who oppose discrimination or cooperate in any investigation or lawsuit concerning this charge. Under Section 704(a) of Title VII, Section 4(d) of the ADEA, Section 503(a) of the ADA and Section 207(f) of GINA, it is unlawful for an *employer* to discriminate against present or former employees or job applicants, for an *employment agency* to discriminate against anyone, or for a *union* to discriminate against its members or membership applicants, because they have opposed any practice made unlawful by the statutes, or because they have made a charge, testified, assisted, or participated in any manner in an investigation, proceeding, or hearing under the laws. The Equal Pay Act has similar provisions and Section 503(b) of the ADA prohibits coercion, intimidation, threats or interference with anyone for exercising or enjoying, or aiding or encouraging others in their exercise or enjoyment of, rights under the Act.



GBA + GSFIC + SPC

Human Resources Form

POLICY FORM # HR-03	Unlawful Discrimination Complaint Form	Page 1, of 2
Employee Name:	Employee ID #:	,
Job Title:	Department:	
Work Telephone:	Home Phone:	
Best time to reach you	oy phone: E-mail:	
Preferred Mailing Addre	ess:	
Race	nlawfully discriminated against because of my (check as many as apply Disability Color Age Sex Religion gin Political Opinions or Affiliations	·):
And/Or because of: Retaliation	for having filed or participated in a previous complaint of unlawful discr	rimination
•	e(s) and job titles of the person or persons you allege are responsible retaliation, or sexual harassment.	for the
	•	· ·
the time and place of the	tual basis for your complaint. Please provide as much detail as possibe discrimination, the names of any witnesses, and describe the problem of the discrimination. Please continue on a separate sheet and attach a tion.	ms you are

Case 1:23-cv-00313-LMM Document 1-1 Filed 01/20/23 Page 13 of 13

Unlawful Discrimination Complaint Form - HR-03

		
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	<u>.</u>	
		·
Are you submitting additional documents?		
Requested relief:	*	,
		· · · · · ·
· · · · · · · · · · · · · · · · · · ·		`
My signature certifies that the information of supporting documents is true and correct to		ation Complaint Form and
Signature:	Date:	
		·-·

Hand deliver, fax, or mail this Unlawful Discrimination Complaint form and supporting documents to:

Director of Human Resources GBA, SPC, GSFIC 2nd Floor 270 Washington Street Atlanta, Georgia 30334 Fax 404-463-5669

For information or assistance please call the Human Resources Department at 404-463-5656.